Best Available Copy -

			Application or Docket Number										
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 KNIES											- PO2		
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TC	STAL CLAIMC		(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS								RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		B	ASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		. 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		. 0			X40=		OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	355-00	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER		
-	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=		X\$ 9=	ş	OR	X\$18=		
AME	Independent	•	Minus	***		=		X40=		ÒR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				T.CLAIM			405			270-		
	, i		+135=		OR	+270=							
			AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE						
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY) FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	••		=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		=	1	X40=	7	l ·	X80=		
2	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	'ENDEN	T CLAIM	. D	J. ├			OR		 	
								+135=		OR	+270=		
								TOTAL DIT. FEE	1	OR	TOTAL ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total		Minus	**		=	1	X\$ 9=	*	OR	X\$18=		
ME	Independent	•	Minus	***		=	1 H	X40=			X80=	<u> </u>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							^+0-		OR	700-	 	
+135= OR											+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE													
	If the "Highest Nu The "Highest Nur	imber Previously Pa mber Previously Pai	aid For" IN THI id For" (Total o	S SPACE	is less tha dent) is th	an 3, enter "3." e highest numb			propriate bo	x in co			